

# Coconino County DUI Court Abatement Grant Evaluation

Frederic I. Solop, Ph.D.

Director

Principal Investigator

Kristi K. Hagen, M.A., M.A. Associate Director Co-Principal Investigator

Prepared by: Tina M. Eyraud Project Manager

Research Team: Sara Berscheit, Lori Whitbred, Lisa Tomczak



## **Social Research Laboratory**

P.O. Box 15301 Flagstaff, AZ 86011-5301 (928) 523-1515 www.nau.edu/srl

December 2005

## Coconino County DUI Court Abatement Grant Evaluation

## **Table of Contents**

	Page Number
A. Introduction	2
B. Methodology	5
C. Executive Summary	6
D. Qualitative Data Findings	10
E. Quantitative Data Findings	17
F. Appendix A: Interview Protocol	25

## A. INTRODUCTION

Drunk driving is considered the most deadly crime in America by criminal justice authorities as 43 percent of U.S. traffic fatalities occur due to impaired driving. Consequently, impaired driving poses a formidable threat to public safety. In addition, over one-third of those arrested for drunk driving are repeat offenders, and arrest alone does not deter continued alcohol use or driving under the influence of alcohol and/or drugs. The Coconino County DUI¹ Court Abatement (CCDCA) program is designed to address issues such as these by emphasizing incentives for sobriety, probation monitoring, and long-term treatment as directives to reduce recidivism and augment public safety.

The Coconino County DUI/DC program applied for and received DUI abatement grant funds in an effort to increase 2005 treatment capacity for felony DUI defendants by 40 percent. Included in this grant funding is an evaluation component that measures attainment of goals and objectives at the end of a 12-month period. This report provides an evaluation of the CCDCA that includes both primary and secondary data materials.

The Social Research Laboratory (SRL) of Northern Arizona University (NAU) has been commissioned by the CCDCA program to evaluate the efficacy of its compliance with the 2005 Arizona Criminal Justice Commission (ACJC) DUI grant proposal. The original program, Coconino County DUI/Drug Court, was established in 2001 with support from the federal government and the state of Arizona. The Coconino County DUI Court program was established in 2004 to compliment the existing program by increasing resources to accommodate additional participants. The evaluation conducted by the SRL explores the effectiveness of the CCDCA program in working with felony DUI offenders.

The Coconino County DUI Court is a post-plea, voluntary pre-adjudication alternative to prison for chronic DUI offenders who are non-violent adults. The minimum participant program commitment time is ten months, divided into three phases. Transition from one phase to the next is dependent on participants' adherence to predetermined criteria: staying clean and sober, keeping scheduled meetings and court dates, and maintaining fee payments. Throughout all three phases the program administers random, but regular, breath and urinalysis tests. In addition, all phases mandate community service or employment. Graduation is contingent upon successful implementation of all phase criteria plus clean urinalysis and breath tests for a minimum of six months.

Phase I is the Stabilization and Orientation phase with a two month minimum participation time. It is characterized by the most intense outpatient treatment and court visits. Participants see the Judge once a week and have treatment three times a week. Phase II, or the Intensive Treatment phase, has a three month minimum

\_

<sup>&</sup>lt;sup>1</sup> Driving Under the Influence

and two support group meetings per month. Phase III, or the Continued Recovery phase, has a five month minimum participation time and participants see the Judge twice a month. As the participant advances through each stage, the number of outpatient treatments and Judge/Court meetings diminish, and the number of support group meetings increase.

The CCDCA program is using ACJC grant funds to cover the costs of increasing treatment of felony DUI offenders in the program by 40 percent over a one year time period. The costs include staff salaries, outpatient treatment, and an external evaluation. Additionally, this increase in DUI cases increased the workload of the entire CCDCA team in many areas. In response to increased workload, the CCDCA team hired a part-time probation officer and supplemented the salaries of the CCDCA Prosecutor and Public Defender.

The additional treatment money provided through the CCDCA Grant is designated for ten months of intensive outpatient treatment for participants in private and group therapy sessions. All individuals treated by these monies must be felony DUI offenders who only have DUI Court referrals. Over the past two years 70 percent of the referrals to standard, existing Coconino County DUI Court have been for felony DUIs. Therefore, the DUI Court has been specifically designed to work with hard core, repeat DUI offenders who are alcohol and/or drug dependent.

The innovative CCDCA works through stipulated sentences, explicit program requirements, judicial monitoring, strong accountability, quality long-term treatment, regular random alcohol/breath tests and urine analysis, immediate sanctions for non-compliance, and a variety of short and long-term incentives for sustained sobriety. Eligible participants are eighteen years old or older, non-violent males and females, repeat offenders, and defendants who have been charged with felony DUI (driving under the influence of alcohol and/or drugs). CCDCA is designed to increase sobriety through intense treatment and decrease DUI recidivism to improve public safety for the citizens of Coconino County.

The Social Research Laboratory team at NAU conducted the external evaluation of this program. The research team included Frederic I. Solop, Ph.D., the Director and principal investigator for this project; Kristi K. Hagen, M.A., M.A., Associate Director and co-principal investigator; and Tina Eyraud, graduate research assistant and project manager.

The Social Research Laboratory is a full-service research and teaching facility located within the College of Social and Behavioral Sciences at Northern Arizona University. The Social Research Laboratory offers quality research services to public and nonprofit clients while providing graduate and undergraduate students at NAU with applied research instruction and experience. The Social Research Laboratory specializes in program evaluations, public opinion studies, needs assessments, and demographic and social issues analyses.

The SRL has extensive experience with program evaluation projects, having recently completed a comprehensive evaluation of Coconino County DUI Court as well as evaluation work for the Office of Government Development of the Navajo Nation, Hopi Head Start, Head Start of Northern Arizona and the Federal Emergency Management Agency. The SRL also has experience working in related issue areas including health care, social issues, criminal justice, education, and the environment. Recent clients include the National Park Service, US Forest Service, National Science Foundation, Arizona Department of Health Services, Arizona Tobacco Education and Prevention Program, Arizona State Supreme Court, Arizona Department of Environmental Quality, The Guidance Center, Coconino County Superior Court, the Flagstaff City Council, and the Flagstaff Chamber of Commerce.

## **B. METHODOLOGY**

This evaluation examines the efficacy of the Coconino County DUI Court Abatement (CCDCA) program using both qualitative and quantitative data. The qualitative portion of the evaluation is comprised of summaries elicited from personal interviews with key stakeholders involved in the program—including members of the DUI Court team and representatives from the Coconino County Attorney's office. The qualitative portion also included observations of key activities. SRL staff members observed a CCDCA staff meeting and a CCDCA hearing held for all participants in the program—summaries of the observations are included in the report findings.

Quantitative data includes descriptive information from a sample of nine individuals randomly chosen from the population of total participants currently admitted in the DUI Court program. The sample was randomly drawn from a list of all participants. Redacted information for the nine selected participants was provided to the SRL research team. The participants are described in terms of general demographics, mental/physical health, DSM-IV recommendations, legal problems and/or number of arrests, personal drug and/or alcohol use history, family use history, and social support system. Quantitative data from the CCDCA Program End-of-the-Year report are also provided. For the purposes of this report, Coconino County DUI Court Abatement (CCDCA) and DUI Court are used interchangeably and refer to the abatement portion of Coconino County DUI/Drug Court.

## **C. Executive Summary**

The Executive Summary reviews significant findings from each section of the Coconino County DUI Court program evaluation report. The report findings beginning in Section D explore these items in greater detail.

#### Stakeholder and DUI Court Team Member Interviews

- ❖ According to the key stakeholders and DUI Court team members, the primary goal of the program is to increase public safety regarding criminal offenses related to drug and alcohol addiction, this is to be achieved by increasing the number of participants in the program and providing tools for maintaining their sobriety.
- Stakeholders and team members collectively describe the DUI Court program as a positive, self-empowering, long-term tool that improves the quality of life for participants, their families/friends, and Coconino County as a community. Enhanced by staff dedication, the program encourages personal responsibility, provides mentoring and peer review, and sets people up for success rather than failure—two thirds of DUI Court participants (67%) have graduated from the DUI Court program.
- The ultimate beneficiaries of a successful DUI Court program are the communities of Coconino County. Those who immediately benefit are those within the DUI population who have a home or children to lose; those who hold multiple offenses or have health problems associated with substance use; and those who use both drugs and alcohol.
- Chronic DUI offenders who are treated in the CCDCA program are exclusively Coconino County residents. They are volunteer, non-violent offenders. They are users of drugs and/or alcohol who may have been charged for other offenses in addition to DUI.
- Stakeholders praise the intensity of commitment DUI Court team members demonstrate. They say participants are empowered by taking personal responsibility and benefit from the well-monitored, long-term, intense treatment of the program. Additionally, participant experience and sobriety is passed on to friends, family, and the community as a whole. Crimes associated with drug and alcohol offenses were reduced during the grant period.
- ❖ The primary weaknesses of the program, according to the DUI Court team and stakeholders, are lack of funding for staff and therapeutic resources, the impeding of the participant enrollment process due to multiple

- charges/multiple hearings, and the time and staff power consumed with the transfer of cases from division to division.
- Challenges to the DUI Court program include insufficient full-time personnel, lack of funding for clients who require additional counseling and housing, consistency in attorney referrals, and program management cohesion.
- ❖ DUI Court stakeholders encourage collaboration among team members; they suggest reallocating funds to provide clients with essential services, provide the program with a full staff, and pay attorneys for court time. They also suggest institutional adjustments to participant fines and fees to ease their financial burden within the current ten month period.

#### **DUI Court Staff Meeting Observation**

- ❖ The team was observed to work effectively and efficiently. Cases are thoroughly reviewed and action is taken when team members reach consensus. Consistency is maintained with sanctions and rewards across participants who exhibit similar behaviors and attitudes.
- ❖ The team expressed interest in each participant's social support system, their medical and housing challenges, and inability to pay fines and fees, which can impede phase and program graduation.

#### **DUI Court Hearing Observation**

- ❖ All DUI Court participants are required to attend weekly court hearings in Flagstaff. Court was well-attended and participants respectfully engaged in the proceedings. Each participant heard by the DUI Court Judge was treated with consideration and firm direction.
- Participants demonstrate solidarity with the program and encourage each other in their long and short-term objectives.
- Clients who attain A-team status are praised publicly and rewarded with privileges and prizes. On the day of observation, a record number of participants (18) gained A-team status. Additional activities and outside supports are provided and encouraged.

## DUI Court Participant Demographics<sup>2</sup>

- ❖ Participants in the program are adults with the majority being between the ages of 18 and 34 (56%). The remaining participants (44%) are between the ages of 35 to 59. The large majority of clients are male (89%) with slightly more Native American participants (56%) than White participants (44%).
- ❖ Two-thirds of participants have acquired some college education (67%) and over half were employed (56%) at the time of their admission into the program. Fifty-six percent of participants reported their income as below \$10,000 annually. Two-thirds of the clients are married (67%), while twenty-two percent are divorced. Eighty-nine percent report having children.
- ❖ On average, the mental health status of participants has been described as devoid of mental health problems or suicidal ideations, although some participants reported experiencing anxiety, nervousness, and/or depression at the time of assessment. All participants in the sample population have been diagnosed with alcohol dependence (according to the Diagnostic Statistics Manual IV, section 303.90).
- ❖ Half of the CCDCA program participants (50%) report a history of familial alcoholism. Another thirty-eight percent are unsure of their families' past behavior. The mean age of participant first intoxication is 15, and the mean age of heaviest alcohol use is 28 years.

#### Secondary Data (Data provided by the DUI Court Program)

- Public safety increased during the funding period. Out of 2,388 drug tests, only 50 (2%) yielded positive results. Thirteen participants were sanctioned for driving without a license.
- Sustained sobriety was achieved by fourteen participants who were able to remain clean and sober from the time of their DUI Court admission through graduation.
- ❖ There were 68 total participants (40 new) at the end of the fourth quarter of the funding period—an average of 10 new clients per quarter.
- ❖ The objective was to provide a long-term continuum of treatment and support services for participants. Over the one-year funding period, individual treatment occurrences totaled 2,465; support group meetings totaled 3,138.

\_

<sup>&</sup>lt;sup>2</sup> This summary of participant information was gathered from the random sample of nine client files.

- ❖ Program accountability was upheld by mandating weekly participant appearances before the DUI Court Judge. During the one-year grant period, a total of 142 sanctions were set by the DUI Court Judge.
- During the funding period participant arrest data was checked and documented to measure recidivism reduction. A total of seven arrests occurred by the end of the four-quarter report period. During the funding period 13 participant probation violations were documented.
- ❖ The total number of documented prison days saved is 5,520, indicating the reduction of prison overcrowding by non-violent, felony DUI offenders.
- Ninety percent of the DUI Court participants were required to work or attend school full-time (in contrast to 56% employment rate at the time of client admission). At the end of the grant period the average employment rate was recorded in excess of 90 percent.
- Services specific to the cultural needs of Native Americans were developed. These included programs by NACA (Native Americans for Community Action), sweat lodges for men, and culturally specific program manuals.
- ❖ DUI Court grant goals were met on ten of eleven objectives (see grant proposal). The total number of DUI offenders was not increased by 40 percent, although an increase was reported for each quarter of the grant period and a 24 percent total increase was achieved.

## **D. Qualitative Data Findings**

## **DUI Court Staff Meeting Observation**

Evaluators from the Social Research Laboratory research team observed the DUI Court team meeting on November 16, 2005. A staff meeting is held each Wednesday morning at the Coconino County Courthouse from 9:00 AM to 12:00 PM until each case has been reviewed and each member of the team has been thoroughly updated on participant progress. The files and updates were well supported as each team member kept a record of the discussion.

In general, the staff's objective was to provide consistency for each participant in the program in terms of rewards (e.g., A-team status, compliancy privileges, public praise, phase and/or program graduation) and sanctions (e.g., fines, loss of privileges, a jail sentence, or loss of phase and/or program graduation). Compliance was measured systematically by clean urine analyses, kept meeting and court dates, and the payment of fees and fines. Compliant participants were also eligible for the open travel policy where they were permitted to travel outside Flagstaff city limits having given written notice in advance.

The team operates from a checks-and-balances approach where each member has an equal voice in the case management decision-making process. Individual team members may understand participant behavior differently. For example, one member may interpret a participant's behavior as manipulative; while another member may understand the same behavior as normal conduct for an addict. However, the group exercised flexibility and came to an agreement after other participant behaviors had been taken into consideration, such as the individual's overall attitude and previous record of compliance.

In addition, each participant's case was reviewed in holistic terms where families, relationships, and employment were discussed and integrated into the final evaluation. Understanding the level of support each person has in their goal for sobriety allows the DUI Court staff to adjust treatment appropriately while maintaining a general philosophy of personal responsibility. In this way, staff actively sought out motivations that participants use to obtain their goals and assist them to remain clean or sober.

The issues (as discussed in the meeting) faced by both the DUI Court team and participants included problems of non-payment that impede phase and program graduation; medical problems and disabilities that hinder program eligibility; transportation, as participants are without a license; employment; housing for homeless participants; time off/time away; and post DUI Court support (structural and familial). Issues following program graduation include participants' ability to handle situations with parents and relationships with significant others finding sober/clean support systems, networking, role models, and family support;

employment due to past criminal history; and the participants' ability to connect with their own talents and skills for work and leisure pursuits.

Overall, the team was observed to work effectively and efficiently. Cases are thoroughly reviewed, discussed, and action is taken once all team members reach consensus. Consistency is maintained with sanctions and rewards across participants who exhibit similar behaviors and attitudes—participants are evaluated by compliance with standardized criteria and flexibility of individual histories. In addition, the team expressed interest in each participant's social support system, their medical and housing challenges, and their inability to pay fines and fees that sometimes impede phase and program graduation.

#### **DUI Court Hearing Observation**

Two evaluators from the Social Research Laboratory observed the DUI Court hearing on November 16, 2005. All DUI Court participants are required to attend weekly court hearings in Flagstaff. Those who have attained A-team status are allowed to leave early as an exercise of their privileges for compliance with program policies. On the day of the observation, there was a record number of participants (18) who gained A-team status. Gift rewards were presented to a select group (e.g., a t-shirt, a candle) as an incentive for sobriety and program compliance. The remaining participants waited their turn to speak with the judge from a podium regarding their progress and/or sanctions. Each person heard by the court was treated with consideration and firm direction.

Prior to and during the court process many participants spoke with one another and were smiling and laughing. Those who were announced as new A-team members, or phase graduates, were applauded. There was an overall appearance of solidarity with the program and group encouragement among the participants in accomplishing their long and short-term objectives.

An announcement was made to inform everyone of the upcoming sweat lodge event for men (November 20, 2005). The sweat lodge is a ritual for teaching, praying, and singing exercised by some Native Americans as a way to cleanse physical and spiritual impurities. The sweat lodge is also associated with passing through stages of the life cycle; everyone was invited to attend the sweat lodge.

### Summary of Stakeholder Interviews

Five interviews were completed with individuals selected from the pool of key stakeholders and team members of the DUI Court program. These interviews were conducted in an effort to obtain an in-depth perspective of general and specific DUI Court program attributes. The attributes summarized by the interviewed stakeholders include primary goals and accomplishments; program strengths and weaknesses; a description of the target population; challenges facing stakeholders

and participants; and suggestions for improving the DUI Court program in general. [Appendix A contains the complete stakeholder interview questionnaire].

**Goals.** The primary goal of the DUI Court program is to increase public safety by reducing felony DUI recidivism. Recidivism is effectively diminished not only by getting men and women clean and sober, but by providing tools for maintaining sobriety throughout the program and beyond. Program objectives include increasing the number of participants, assisting participants in creating clean, sober networks and strong relationship ties; assistance in getting reacquainted with personal skills and/or talents; and encouraging permanent employment. This prescription has the potential to "change community liabilities to community assets."

The goal of 40 percent participant increase in chronic DUI offenders participating in the DUI Court program has not been reached to date. During the funding period the initial population of DUI offenders was 28. An additional 40 offenders were pled into the program; the total number of DUI offenders treated during the one-year period is 68. People interviewed for this research indicated lower participant numbers, which they perceived as partially due to a lack of referrals and lengthy case processing time. A number of potential participants face multiple charges that have to be processed independently of DUI Court. Processing time, relocation, and ineffectual charge coordination impedes participant recruitment.

**Target population**. The ultimate beneficiary of a successful DUI Court program is the community of Coconino County. Beneficiaries within the DUI population are those who have committed multiple offenses—referred to by justice system professionals as "hardcore" or "chronic offenders"—having been arrested for DUI three times or more. The program also benefits those with health problems associated with drug and/or alcohol use by alleviating the aggravation to their affliction. DUI Court is especially valuable for people using both drugs and alcohol. The combination treatment system addresses and diminishes the potential of participants to replace drug addiction with alcohol.

Stakeholders maintain that treatment is most valuable for those who have something to lose such as their children, home, and/or a job. Therefore, participants who have a family, home, and/or employment have the most to gain from DUI Court. Again, there are secondary benefits subsequent to treating the primary target population. For example, successful graduates influence their friends, families, other participants, and the community in general—by acting as positive role models and spokespersons. One stakeholder adds that since "Native Americans give stability and honor their commitments," they are a great benefit to the entire community or local tribe when they return from the program.

**Treated population**. Chronic DUI offenders treated in the program are exclusively Coconino County residents referred to the program by private counsel. They have voluntarily chosen the DUI Court program over prison when given the option of DUI Court or Department of Corrections. DUI Court team members noted "on average,"

they have been arrested three or four times." Team members also report that "participants are non-violent offenders who are more likely to be male than female (85% and 10% respectively); and they are Native American or White (there are a few Hispanics and African Americans but these were not part of the sample that was described earlier)." They are users of drugs and/or alcohol who may have been charged for other offenses in addition to DUI.

**Program strengths**. There are several structural, procedural, and social strengths that enhance the DUI Court program. Structurally three crucial strengths define the program: the DUI Court team, the length of the program, and intense treatment. The program team utilizes a multi-perspective, consensus-style case evaluation process that perpetuates consistency and cohesiveness in program coordination. "Alliances are formed between different members on different issues." The participants benefit from thorough case management, client advocacy, and taking a treatment approach to DUI arrests. In addition, the program's long term ten-month treatment plan (in contrast to 28-day programs) equips participants with skills to maintain sobriety when they return to environments that were once conducive to their addiction. Intense and frequent counseling provides participants with tools designed for real change. Continued sobriety is dependent on the ability of participants to handle problems they will encounter in everyday life.

Procedurally, there are three key strengths to the program: reward incentives, sanction measures; and close supervision. Incentives to stay clean and sober (public praise, awards, A-team status/traveling privileges; and ultimately phase and program graduation) support participant effort and encourage solidarity. The team's ability to react swiftly to participant transgression with punitive measures also allows the participants to easily connect unsatisfactory behavior with negative consequences. Participants themselves support the program's policy of close supervision, frequent urine analysis, and breathalyzer tests—claiming that it helps them stay clean and sober.

Socially, there are four vital strengths to the program. First, crimes that are associated with drug and alcohol offenses (burglary, manslaughter, domestic violence, etc.) are reduced as a result of changed behavior. Second, sober graduates pass on their sobriety to family and friends. Third, participant employment increases as a result of DUI Court (40-50% of the employed were so before admission and about ninety percent are employed after admission). Finally, stakeholders assert that the program levels the playing field in terms of class, gender, and ethnicity.

**Program weaknesses and challenges**. The primary weaknesses experienced by the DUI Court team are lack of funding for staff and therapeutic resources, and an enrollment process that impedes the participant due to multiple charges and consequent multiple hearings. Much time and staff power is consumed with the transfer of cases from division to division.

Participant progress and graduation is delayed by participant inability to pay DUI fines and fees. When participants cannot afford to pay the fees, they are not allowed to graduate. In addition, further therapeutic resources are needed to ensure that participants have "basic life skills counseling to manage life stressors so they can deal with their substance abuse problems." A major challenge to the DUI Court program is to socially and clinically influence a change in participant lifestyles to reduce the risk of relapse. Lack of adequate funding precedes an institutional exclusion of persons who require additional mental health assistance and housing. One DUI Court team member says, "The DUI Court program needs the ability to treat persons with dual-diagnosis of a serious mental illness (e.g., schizophrenia, psychosis, etc.) and criminal behavior—some are excluded currently." DUI Court does admit individuals with mental health problems not classified as serious mental illness. For example, DUI Court admits participants with depression, anxiety, bipolar and post-traumatic-syndrome disorder. Most challenges to the DUI Court program relate to inadequate funding creating staffing issues that range from heavy demands on limited personnel, to compromising the program with inconsistencies created by less-informed part-time staff. Funding issues also restrict treatment needs for those who require additional counseling and housing.

An additional challenge affecting DUI Court participant admission is an inconsistency in attorney referrals. Attorneys have a different type of investment in referring cases to the DUI Court that is sometimes contingent on case disposition in contrast to client sobriety. Strongly influenced by the "zero tolerance" standard, there is disagreement as to who are appropriate candidates for DUI Court versus those who should serve prison sentences. In addition, local police departments also invest differently as some do not support alternatives to punitive measures such as treatment programs.

**Stakeholder and DUI Court team member suggestions**. Regarding internal issues, stakeholders and DUI Court members encourage collaboration among team members to promote consistency in issuing participant sanctions and "balancing protocols." As a group, they suggest increasing the level of coordination between team members and external management.

Monetary deficiencies, and/or the necessity to reallocate funds, affect numerous aspects of the DUI Court's efficacy in delivering participant therapeutic and probation services, employment, and stable housing. Staff members are at a maximum output capacity and full-time, permanent employees are needed to maintain basic services and ensure swift and accurate transfer of case information. Team members also suggest reimbursing the attorneys for their time spent in court. Additional financial support is needed for client medical care, housing for the homeless, vouchers for primary needs, and the purchase of new technology such as ankle bracelets to widen the scope of participant surveillance.

The DUI Court team wants to preserve the currently implemented, positive incentives for sobriety and suggests institutional adjustments to DUI fines and fees.

DUI fines can be \$2,500-\$3,000 to be paid in a 10 month period (\$250-\$300 per month). Participants experience great difficulty in meeting payment deadlines and their subsequent success in the program is compromised.

*Major accomplishments.* The five interviewed stakeholders collectively describe the DUI Court program as a positive, self-empowering, long-term tool that improves the quality of life for participants, their families/friends, and Coconino County as a community. Enhanced by staff dedication, the program encourages personal responsibility, provides mentoring and peer review, and sets people up for success rather than failure. Nearly two-thirds of DUI Court participants (67%) have graduated from the DUI Court program.

"Drunk driving is a bigger killer than guns and violence combined" reveals one stakeholder. It is important to realize that post-graduate participants are more likely to be employed, with the consequence that their sobriety create a new network of alternatives to substance use by their example. Another DUI Court member thought the definitive accomplishment of the program was the birth of a drug-free baby, "even one drug-free birth means a lot, and there may be another on the way."

Overall, the goal of the DUI Court team is to increase public safety by reducing DUI recidivism through an intense, multi-phased system of substance-abuse treatment, social support, and individual incentives. The target population and the treated population are, for the most part, the same: chronic, non-violent DUI offenders who were offered and choose DUI Court over prison. Unfortunately, the proposed 40 percent increase in participant enrollment has not been reached to date [see Quantitative Data Findings for updated statistics].

The DUI Court team is faced with two challenges in accomplishing enrollment goals: lack of consistency in referrals from attorneys and delayed processing time for participants with multiple charges and subsequent multiple hearings. Suggestions for new directives include increasing the level of coordination between members and external management; and improved collaboration among team members. Other challenges to the program that compromise participant success are funding issues and program fees and fines. Additional funding is needed to support a full-time staff, compensate attorneys for days in court, provide housing and vouchers, and to support additional probation and therapy services for select participants to promote their post-graduate success. Additionally, team members recommend institutional adjustments to DUI fines and fees, as graduation can be delayed due to lack of resources.

Those interviewed praise the intensity of commitment the DUI Court team members demonstrate in spite of the occasional challenges they face. They assert that participants benefit from a team that is both consistent and flexible. In general, participants are empowered by taking personal responsibility and benefit from the well-monitored, long-term, intense treatment of the DUI Court program. In turn, their

experience and sobriety is passed on to friends and family. Successful graduates become role models in their community.

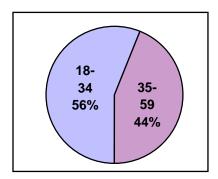
## **E. Quantitative Data Findings**

There are two sections for Quantitative Data Findings: Summary of Participant Demographics and Summary of Secondary Data provided by the CCDCA Program. The demographic information (e.g., race, gender, education) is a summary of data obtained from a sample of nine participants randomly selected from the population of CCDCA participants. The secondary data was obtained from quarterly progress reports prepared by the CCDCA Program Coordinator.

## Summary of Participant Demographics

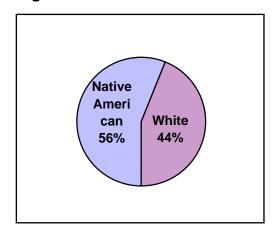
Over half (56%) of the CCDCA's participants are under age 34. They are between the ages of 39 and 59 with an average age of 35.

Figure 1: Age of Participants at Assessment



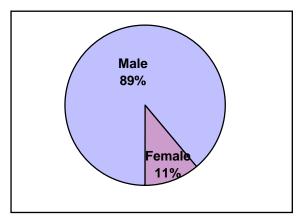
Native Americans comprise over half of the program's participant population (56%); the remaining 44 percent of CCDCA participants are White. [See Figure 2].

Figure 2: Race of DUI Court Participants

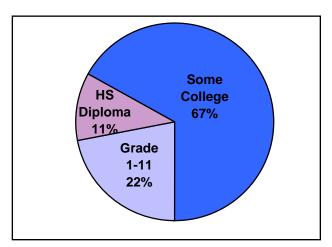


The majority of CCDCA participants are male (89%), eleven percent are female. [See Figure 3].

Figure 3: Gender of Participants



Sixty-seven percent of participants have some college education (2 years or less); 22 percent have completed at least an 11th grade education; and the remaining 11 percent have attained a high school diploma. [See Figure 4].



**Figure 4: Highest Education Attained** 

Employment rates improve for CCDCA following their admission to the program. Over half (56%) of the participants in the DUI Court program were employed at the time of their admission assessment. Twenty-two percent had been unemployed for over three months, and 11 percent had been unemployed for one to three months [See Figure 5]. Client employment rate increased 35 percent following admission to the DUI Court Program.

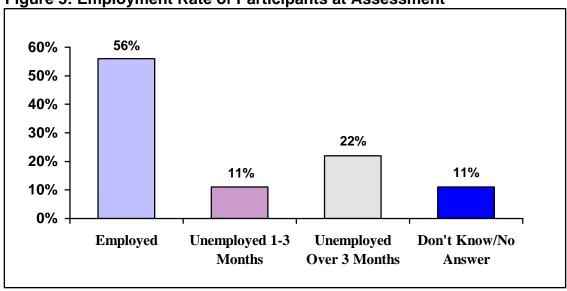


Figure 5: Employment Rate of Participants at Assessment

Over half of DUI Court clients (56%) earn less than \$10,000 annually, and twenty-two percent earn between \$10,000 and \$24,999 per year. One individual reports

grossing between \$25,000 and \$49,000 annually, and another individual \$50,000 and \$74,999 per year. Overall, over three quarters (78%) of the participants in the program earn less than \$25,000 annually [See Figure 6].

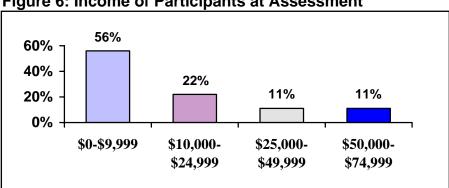


Figure 6: Income of Participants at Assessment

Participants were asked to assess their physical health status. Responses are moderate overall, as there are no reports of either "excellent" or "poor" health. Selfreported health statistics reveal that one third (33%) consider themselves in "good" condition, and well over half (67%) of program participants consider themselves in "fair" condition [See Figure 7].

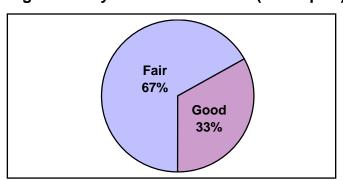


Figure 7: Physical Health Status (self-report)

When DUI Court participants were asked to disclose the number of times they had been arrested for DUI in the past two years, there were three responses: one, two, or five arrests. Sixty-seven percent of preferred participants said they had been arrested two times; 22 percent said they have five DUI-related arrests; and only one individual had been arrested once for driving under the influence [See Figure 8].

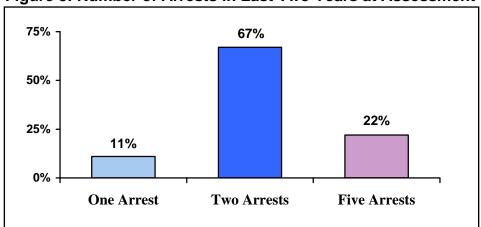


Figure 8: Number of Arrests in Last Two Years at Assessment

The majority of the sample of clients reviewed (N=9) in the program (67%) are single; 22 percent are divorced; and one client is married (11%). Most participants have children (89%); only one does not (11%). [See Figures 9 and 10].

Figure 9: Marital Status of Participants at Assessment

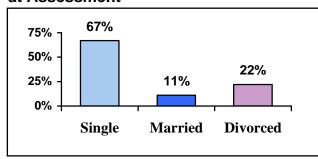
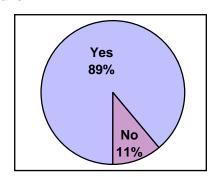


Figure 10: Does participant Have Children?



On average, participants from the DUI Court sample population are reported to be devoid of mental health problems or suicidal ideations. There are a few who were experiencing anxiety, nervousness, and/or depression at the time of assessment. Additionally, participants reported having family, friends, and co-workers included in their social support system. Only one client claims to have "no friends, only drinking buddies."

Program participants first experienced intoxication between the ages of 13 and 21; the mean age of first use is 15 years. The heaviest use of alcohol and/or drugs occurred between the ages of 19 and 45; the mean age of heaviest use is 28 years. Fifty percent of participants reported a history of familial alcoholism; over one third

(38%) reported to be unsure of their family's substance history; and only one client reported the absence of familial alcoholism altogether.

Nearly all participants (89%) in the sample population have completed other short-term treatment programs such as education sessions, treatment through their employer, or NACA (Native Americans for Community Action) services. Only one participant reports having been without care prior to the DUI Court treatment program.

All participants in the sample population have been diagnosed with alcohol dependence (Diagnostic and Statistical Manual IV, section 303.90), and it has been recommended that they attend support groups. In addition, all clients are currently on probation under the DUI Court program mandate.

## Detailed Summary of Secondary Data Provided by the DUI Court Program Year-End Report

The following eleven variables were identified in the original proposal for the Coconino County DUI Court grant and their measurable performance indicators reflect criteria relevant to the eleven objectives of the one-year DUI Court grant criteria. [See Table 12 for a comprehensive overview for all variables].

*Increase public safety.* Public safety was measured by documenting the total number of positive alcohol/drug tests and the total number of sanctions given to participants throughout the four quarters of the funding period. Out of 2,388 tests, only 50 (2%) yielded positive results, and 13 participants were sanctioned for driving without a license.

**Attain/sustain sobriety.** Sustained sobriety was measured by the length of time the participants remained clean and sober. Fourteen participants were able to remain clean and sober their DUI Court through graduation.

*Increase DUI offenders by 40 percent.* There were a total of 28 participants at the beginning of the one-year funding period. During that time 40 new participants were pled into the DUI Court program. A total of 68 participants remained at the end of the period.

**Long-term treatment**. The objective was to provide a long-term continuum of treatment and support services for DUI Court participants. Long-term treatment and services were measured by documenting each treatment, support-group session, and/or healthcare service received by participants. Over the one-year funding period, individual treatment occurrences totaled 2,465; and support group meetings totaled 3,138.

**Program accountability**. Program accountability was upheld by mandating weekly participant appearances before the DUI Court Judge and subsequent sanctions for substance use and/or absences from Court or institutional meetings. During the one-year DUI Court grant period, a total of 142 sanctions were set by the Judge for substance use or program non-compliance.

**Reduce recidivism**. During the funding period participant arrest data was checked and documented as an indicator for client recidivism. Seven arrests occurred by the end of the four-quarter report period.

**Reduce the number of probation violations**. The total number of DUI Court probation violations were calculated as an indicator of violation reduction. During the funding period 13 probation violations were documented.

Reduce prison overcrowding by alcohol abusing, non-violent offenders. The total number of jail days served in DUI Court was compiled and compared to the number of potential prison days specified for felony DUI. The difference is an indicator of the reduction in prison overcrowding generated by non-violent, DUI offenders. Taking into account that participants are required to serve a 30-day jail sentence, the total number of documented prison days saved is 5,520.

*Increase employment rates*. Ninety percent of the DUI Court participants were required to work or attend school full-time to increase participant productiveness. At the time of admission into the DUI Court program the average employment rate for participants was recorded in excess of 90 percent.

**Provide culturally sensitive services**. Services specific to the cultural needs of Native Americans were designed and documented. The services include those provided by NACA (Native Americans for Community Action); independent Sweat Lodges for men; and culturally relevant program manuals.

Overall, goals established by the DUI Court grant criteria were achieved on ten of the eleven objectives. DUI offender participation significantly increased over the one-year funding period, 40 new participants were pled into the DUI Court in total. **Table 12: Summary of Final DUI Court Year-End Report Results** 

Table 12. Summary of Final Dol Court Tear-Life Report Results		
Variable	Performance Indicator	Final Results
Increase Public Safety	<ol> <li>Positive alcohol/drug tests</li> <li>Sanctions received for driving</li> </ol>	1) Total 2,388 tests, 50 (or 2%) were positive 2) 13 participants sanctioned for driving
Attain/Sustain Sobriety	Length of sober time	14 participants clean and sober from admit to DUI Court graduation
Increase Program Participants DUI Offenders	<ul><li>1) Number of new participants</li><li>2) Number of total participants</li></ul>	1) 40 new DUI offenders 2) 68 total participants
Long-term Treatment	Treatment, support groups, and healthcare received	For all funding periods: Treatment = 2,465 Support groups = 3,138
Program Accountability	Sanctions given by Judge for use and absences	Total of 142 sanctions were given
Reduce Recidivism	Arrest data during funding period	7 arrests were made including all 4 report periods
Reduce Probation Violations	Number of DUI Court probation violations	13 probation violations made for all 4 periods
Reduce Prison Overcrowding	<ol> <li>Total number jail days served in DUI Court</li> <li>Compare time served with potential prison time</li> </ol>	1) participants required to 30-day jail sentence 2) Total of 5,520 prison days were saved
Increase Employment Rates	Percentage of participants employed or in school	Employment rate above 90% during all 4 funding periods
Availability of Culturally Sensitive Services	Native American services received	Sweat Lodges; NACA services; and completed manuals
Completion of External Evaluation	Completed evaluation	Will forward upon completion

# Coconino County DUI Court Abatement Program Interview Protocol

#### PRE-INTERVIEW ITEMS

- 1. Re-confirm interview
- 2. Check on parking and interview location
- 3. Get signed consent form

#### ❖ Interview Introduction:

- 1. Explain purpose of study,
- 2. SRL's role (a neutral, evaluative entity, etc.)

  How the information will be used and disseminated,
- 3. Confidentiality, (nothing shared in this interview is taken out)
- 4. Explain consent to participate in interview
- 5. Discuss post-interview thoughts contact SRL
- 6. Introduce SRL team members
- 7. Participants give first name
- 1. What role have you played in the DUI Court Program?
- 2. What do you see as the primary goal of the DUI Court Program?
- 3. Who do you think is the primary target population for this program? Who benefits most from a program like this?
- 4. Who was ultimately treated in this program?
- 5. Was the 40% increase in felony DUI defendants reached? Why or why not?
- 6. What are the strengths of this program?
- 7. What are the weaknesses of this program?
- 8. What are the major accomplishments of this program?
- 9. What are the major challenges to meeting the goals of this program?
- 10. What changes would you make to improve this program? What other suggestions or information can you provide about this program?